	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 31 (check only one) X
A O	ny information copied from such Reports and r for commercial purposes, other than using the	for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) American Academy of Pediatric Dentistry Political Action Committee			
۷.	Full Name (Last, First, Middle Initial) Dr. Lynda N. Dean-Duru			Date of Receipt
	Mailing Address Ashburn Children's Dentistry 44110 Ashburn Village Plaza, #211			07 16 2007
	City State Zip Code			Transaction ID: SA11AI.10820
	Ashburn	VA	20147	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Ashburn Children's Dentis- try	Pediatric Dentist		
	Receipt For: Aggregate Year-to-Date ✓		e Year-to-Date ▼	
	Primary General Other (specify) ▼ 250.00			
 3.	Full Name (Last, First, Middle Initial) Dr. Francis J. Dermody, Sr.			Date of Receipt
	Mailing Address 891 48th Avenue			08 / 07 / 2007
	City	State	Zip Code	Transaction ID: SA11AI.10995
	Vero Beach	FL	32966	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	19		on : Dentist	
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼		250.00	
_ C.	Full Name (Last, First, Middle Initial) Dr. Nicolet DeRose			Date of Receipt
	Mailing Address 316 Fifth Street			11 30 7 2007
	City	State	Zip Code	Transaction ID: SA11AI.11361
	Racine	WI	53403	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General C Occupation Pediatric			250.00
			Dentist	
			ate Year-to-Date ▼	
	Other (specify) ▼		250.00	
Г		-		